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## UTILITY PATENT APPLICATION TRANSMITTAL

			_
Attorney Docket No.  First Inventor		05882.0147.NPUS01	200
		Daniel Afar, et al.	
Title	DIAGNOSIS	OF ZD1839 RESISTANT TUMORS	
Express Mail		EL615212816US	

(Only for new nonprovisional applications under 37 CFR 1.53(b))

APPLICATION ELE	MENTS		ADDRESS TO	Commissioner for Patents  ADDRESS TO: Box Patent Application			
See MPEP Chapter 600 c	oncerning u	ility patent application contents.			on, DC 20231		
Applicant claims s     See 37 CFR 1.27.     Specification     (preferred arrangem     -Descriptive title of i     -Cross reference to     -Statement Regardi     -Reference to sequi     or a computer prog     -Background of the     -Brief Summary of	ate for fee processing) us.  Total Pages <u>94</u> ] elow) cations ored R & D table,	Computer Pro  8.  Nucleotide and (if applicable, a a.  Computer Re. b. Specification Sec  i.  CE	Computer Program (Appendix)				
<ul> <li>Detailed Description</li> <li>Claim(s)</li> </ul>	on		ACCOMPANY	ING APPLICAT	TION PARTS		
Abstract of the Dis  4. ☐ Drawing(s) (35 U.  5. ☐ Oath or Declaration	S.C. 113) [To	otal Pages	10. 37 CFR 3.73( (when there is	s an assignee)	Power of Attorney applicable)		
a.  Newly executed (original or copy) b. Copy from a prior application (37 CFR 1.63 (d)) (for continuational divisional with Box 17 completed) i. DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).  Application Data Sheet. See 37 CFR 1.76  12. Information disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations 13. Preliminary Amendment 14. Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. Other: Check for \$1,008.00					Citations 503) nt(s)		
17. If a CONTINUING APP Application Data Sheet und		eck appropriate box, and supply the re	quisite information below an	d in a preliminary an	nendment, or in an		
☐ Continuation ☐	]Divisional	☐Continuation-in-part (CIP)	of prior application No.:	1	ì		
Prior application information	n: Ex	aminer Group I A	t Unit:				
Box 5b, is considered a p	art of the disc	PPS only: The entire disclosure of t closure of the accompanying continu on when a portion has been inadve	ation or divisional applica	tion and is hereby	incorporated by reference.		
		18. CORRESPOND	ENCE ADDRESS		·		
☐ Customer Number or Bar Code Label 27194 or ☐ Correspondence address below							
Name Howrey Simon Arnold & White, LLP							
Address	Address Box 34						
City	Menlo Par	k State	CA	Zip Code	94025		
Country USA Telephone			(650) 463 8109	Fax	(650) 463 8400		
NAME (Print/Type)	)	Albert P. Halluin/Lorelei P	. Westin Registra	ition No.	25,227/52,353		
Signature	Signature Date July 31, 2003						

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EXPRESS MAIL NO.: EL615212816US

TOTAL AMOUNT OF PAYMENT

or number previously paid, if greater; For Reissues, see above

PTO/SB/17 (09-00)

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## **FEE TRANSMITTAL** For FY 2003

Patent fees are subject to annual revision.

\$1,008.00

Complete if Known Not Yet Assigned Application Number July 31, 2003 **Daniel Afar** First Named Inventor Not Yet Assigned Examiner Name Group Art Unit Not Yet Assigned 05882.0147.NPUS01 Attorney Docket No.

METHOD OF PAYMENT						FEE CALCULATION (continued)					
1.   The Commissioner is hereby authorized to charge					3. ADDITIONAL FEES						
Deposit Acct. No.	08-3038			Large Fee	Entity Fee	Small Fee	Entity Fee	Fee Description	Fee Pald		
Donneit						105	130	205	65	Surcharge - late filing fee or oath	
Deposit Account Name	How	ey Sin	non Arn	old & White, LLP		127	50	227	25	Surcharge – late provisional filing fee or cover sheet	
	arge Anv	Addition	al Fee Red	nuired		139	130	139	130	Non-English specification	
	der 37 CF			14.1.00		147	2,520	147	2,520	For filling a request for ex parte reexamination	
	plicant cla		all entity sta	atus.		112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
2. 🛛 Pa	yment	Enclo	_			113	1,840°	113	1,840*	Requesting publication of SIR after Examiner action	
⊠ Ch	eck 🗌	Credi	it card		ther	115	110	215	55	Extension for reply within first month	
			CALCI	Order JLATION		116	410	216	205	Extension for reply within second month	
				LATION		117	930	217	465	Extension for reply within third month	
1. BASIC	FILIN Entity	G FEE	Entity			118	1,450	218	725	Extension for reply within fourth month	
Fee	Fee	Fee	Fee	Fee Description		128	1,970	228	985	Extension for reply within fifth month	
Code 101	(\$) 750	Code 201	(\$) 375	I miles. Glina foo	Fee Paid	119	320	219	160	Notice of Appeal	
101	330	201	375 165	Utility filing fee Design filing fee	\$750.00	120	320	220	160	Filing a brief in support of an appeal	
106	520	206	260	Plant filing fee		121	280	221	140	Request for oral hearing	
107	750	207	375	Reissue filing fee		138	1,510	138	1,510	Petition to institute a public use proceeding	
114	160	214	80	Provisional filing fee		140	110	240	55	Petition to revive – unavoidable	
117	100	-17	•	F TOVISIONEN TIMEN	·	141	1,300	241	650	Petition to revive – unintentional	
						142	1,300	242	650	Utility issue fee (or reissue)	
			SU	IBTOTAL (1) \$7	50.00	143	470	243	235	Design issue fee	
2. EXTR	A CLA	IM FEE				144	630	244	315	Plant issue fee	
			Extra Claims	Fee from below	Fee Paid	122	130	122	130	Petitions to the Commissioner	
Total Claims	25	-20**	5	× \$18.00	\$90.00	123	50	123	50	Petitions related to provisional applications	
Independent	-			\$10.00		126	180	126	180	Submission of Information Disclosure Stmt	
Claims	5	3**	2	X \$84.00	\$168.	581	40	581	40	Recording each patent assignment per property (times number of properties)	
Multiple Depe	ncent			<u> </u>	\$0.00	146	750	246	375	Filing a submission after final rejection (37 CFR § 1.129(a)	
Large Fee	Entity Fee	Small Fee	Entity Fee	Fee Descrip	otion	149	750	249	375	For each additional invention to be examined (37 CFR § 1.129(b)	
Code 103	(\$) 18	Code 203	(\$) 9	Claims in excess of 20		179	750	279	375	Request for Continued Examination (RCE)	
103	18 84	203	42	Independent claims in ex		169	900	169	900	Request for expedited examination	
102	280	202	140	Multiple dependent claim		İ				of a design application	
109	84	209	42	Reissue Independent o			e (specify) _ ed by Basic	Filing Fee I	Paid	SUBTOTAL (3) (\$)	
110	18	210	9	Reissue claims in exce and over original pater		110000	.0 0) 5230	Timeg Too.	0.0	332.317.m (s) (t)	

SUBMITTED BY			Complete (if applicable)			
Name (Print/Type)	Albert P. Halluin/Lgrelei P. Westin	Registration No. (Attorney/Agent)	25,227/52,353	Telephone	650-463-8109	
Signature	Cellet Mally			Date	July 31, 2003	

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